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REISSUE PATENT A Address to: Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 APPLICATION FOR REISSUE OF: (Check applicable box) I. W Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing Applicant claims small entity status. See 37 CFR 1.27. Specification and Claims in double column copy of pat (amended, if appropriate) Prawing(s) (proposed amendments, if appropriate) Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52) Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52) W Power of Attorney Original U.S. Patent currently assigned? (If Yes, check applicable box(es)) W written Consent of all Assignees (PTO/SB/53) W 37 CFR 3.73(b) Statement (PTO/SB/96) CD-ROM or CD-R in duplicate, Computer Program (Apport large table Nucleotide and/or Amino Acid Sequence Submission	Attorney Doc First Named Original Pate (Month/Day/\) Express Mail Patent The state of the state	ket No. Inventor Int Number Int Issue Date Vear) Label No. Design Paten ACCOMPA 10. Stateme changes 11. Original Ri Si 12. Foreign (if applic 13. Informati Stateme 14. Informati Stateme 15. Prelimina	Normand LeMay 6,321,074 November 20, 2001 EV 320341302 US The plant Patent Patent NYING APPLICATION PART ant of status and support for all to the claims. See 37 CFR 1.173(c) Patent Grant dibboned Original Patent Grant tatement of Loss (PTO/SB/55) Priority Claim (35 U.S.C. 119) Sable) Translation of Reissue Oath/Declara	8 17513 U.S. PTO 10/717426			
(if applicable, all of the following are necessary) a. Computer Readable Form (CFR) b. Specification Sequence Listing on:	SPONDENCE A	ADDRESS					
24442							
	State	OR	Zip Code Fax				
Name (Print/Type) Kimberly K. Baxter Registration No. (Attorney/Agent) 40,504 Signature Date November 19, 2003							

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